

**ADULT INSULIN INFUSION PROTOCOL**  
(Not for DKA)

Date:\_\_\_\_\_ Time:\_\_\_\_\_

1. ☐ D/c Previous insulin orders and d/c oral diabetic agents
2. Maintenance IV Fluids (Should contain Dextrose at a constant rate. **Additional Fluids over 100ml/hr should not contain dextrose**
  - ف 5% Dextrose Normal Saline at 100ml/hr
  - ف 5% Dextrose Half Normal Saline at 100ml/hr
  - ف 5% Dextrose at 100ml/hr
  - ف 10% Dextrose at 50ml/hr (for patients with fluid restriction)
  - ف Other\_\_\_\_\_ at \_\_\_\_\_ml/hour

3. Prepare concentrated insulin infusion with 100 units regular insulin in 100ml/Normal Saline (1 unit per ml)

4. Prime Tubing - Flush first 5ml of the infusion through tubing before connecting to the patient

5. Monitoring

Nursing checks fingerstick blood glucose prior to beginning infusion and every hour until glucose is stable (110-149) for 3 consecutive readings and then every 2 hours. If glucose remains stable for an additional 3 consecutive readings, glucose checks can be extended to every 3 hours. If glucose has changed more than 100 mg/dl from previous reading, re-check glucose to verify accuracy of reading prior to adjusting infusion. If glucose is less than 110 or greater than 149 or patient's clinical condition changes, resume every 1 hour glucose checks.

6. Start Insulin Infusion

ف 1 unit per hour for patient who was previously diet controlled, taking oral agent, or using less than 30 units of insulin per day

ف 1.5 units per hour for patient taking greater than 30 units of insulin per day

ف other\_\_\_\_\_ units per hour

Note: patient or clinical circumstances may force higher initial insulin infusion rates and greater incremental adjustments.

5. Adjust insulin infusion as follows

Glucose < 60            Stop infusion and call house officer. Administer 1 amp D50. Do not re-start infusion until glucose is greater than 100. Repeat every 15 minutes until glucose is greater than 100

Glucose 60-79        Decrease infusion by 50%

Glucose 80 -109      Decrease infusion by 0.3units/hour

Glucose 110-149      No change in drip rate

Glucose 150-179      Increase infusion by 0.3 units/hour

Glucose 180-209      Increase infusion by 0.6 units/hour

Glucose >209        Increase infusion by 1 unit/hour

\* If glucose is greater than 209 and has not decreased despite 4 hourly increases in the infusion rate, then notify the house officer to determine if larger increase is warranted

6. When converting to SQ insulin, give prescribed dose 30 minutes prior to meal. Discontinue infusion after 2 hours if the patient was given insulin lispro or insulin aspart, 4 hours if regular insulin or insulin glargine, or 8 hours if lente or NPH was administered.

Signed\_\_\_\_\_ Pager\_\_\_\_\_